

TO:

STATE PROCUREMENT OFFICE **EMERGENCY PROCUREMENT**

TO:	Chief Procurement Officer							
FROM:	Department of Human Services - Hawaii Public Housing Authority (HPHA) Name of Requesting Department							
Pursuant to HRS § 103D-307 and HAR chapter 3-122, Subchapter 10, the Department requests approval for the following:								
1. Date or perio	od of Emergency:	9/3 - 5/13		2. After-th	e-Fact:	✓ Yes	□No	
3. Describe in detail the emergency situation that created a threat to life, public health, welfare or safety. Raw sewage from a sewer line, serving the state public housing property known as Puahala Homes, that was under repair was clogged and overflowing causing a health and safety hazard. The sewer line was under repair where a primary and secondary sewage pump was needed to prevent raw sewage from overflowing. It was discovered that the primary pump was clogged and broken and the secondary pump was broken as well, leading to the raw sewage to overflow.								
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	tractor/Service Pro ping Services, LLC	vider Name:		<u> </u>		t of Reques 0,738.21	t:	
6. Describe in detail the emergency goods, services, or construction and explain why it is necessary. The primary and secondary pumps were broken beyond repair and the cost to replace the pumps would be substantial. As the repair to the sewer line was almost complete whereby the need for the primary and secondary pumps would not be necessary, a decision was made to obtain emergency septic pumping and waste water removal services on a 24-hour basis to prevent the raw sewage from overflowing and creating a health and safety hazard.								
7. State the reason(s) the vendor/contractor/service provider was selected. Explain what competition, as is practicable, was conducted. The HPHA contacted the following companies and selected the company who could immediately arrive onsite to mitigate the problem: 1) EM3 Pumping Services, 2) Aqua Pumping, LLC; and 3) Oahu Cesspool and Septic Pumping, LLC. EM3 Pumping Services, LLC was the only company who was available, would provide 24-hour service and did not require payment upfront.								
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8. Identify the primary responsible staff person(s) conducting and managing this procurement. (Appropriate delegated procurement authority and completion of mandatory training required.)

*Point of contact (Place asterisk after name of person to contact for additional information.)

<u>Name</u>	Division/Agency	Phone Number	E-mail Address
*Rick Sogawa	DHS/HPHA	832-6038	rick.t.sogawa@hawaii.gov
Sahar Ibrahim	DHS/HPHA	832-5987	sahar.m.ibrahim@hawaii.gov

- Kick Soyawa	<i>рн</i> 5/н <i>Рн</i> А	832-6038	rick.t.sogawa@nawaii.gov	
Sahar Ibrahim	DHS/HPHA	832-5987	sahar.m.ibrahim@hawaii.gov	
All requirements/approval I certify that th	s and internal controls for the same and internal controls for the same and the same are same as a same are same as a same are same as a same are s	his expenditure is the resp the best of my knowledge	ponsibility of the department. c, true and correct.	
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Depa	rtment Head Signature		Date	
	For Chief Procureme	ent Officer Use Only	¥	
Chief Procurement Officer (CPC) Comments:			
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safety hazard. Pursuan shall verify compliance contracts awarded, and HCE certificate and awa	t to HRS section 103D-310 ((i.e. vendor is required to be	c) and HAR section 3-12 e compliant n the Hawaii sted on the Awards Repo se documented in the pro	·	
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Approved	Disapproved	ction Required	8/12/14	

Chief Procurement Officer Signature

Emergency Procurement No

Date